

LIFECARE MEDICAL STUDENT SCHOLARSHIP CRITERIA

The LifeCare Medical Student Scholarship is offered to Roseau County students who are currently enrolled in a healthcare related, post secondary academic program. This special award, which is offered to current post secondary students, was given for the first time in 2008. The intention of the scholarship is to show LifeCare's support for healthcare related careers and encourage students to continue their studies in their chosen field. Scholarships are funded by LifeCare Medical Center, a not-for-profit organization that includes the hospital, Roseau Manor, Greenbush Manor, Home Care and Hospice, Public Health, and Rehabilitation Services.

Two \$1,500 Medical Student Scholarships will be funded through LifeCare Medical Center general fund.

AWARD:

- Two \$1,500.00 scholarships will be awarded in 2023.

APPLICATION DEADLINE:

- **Friday, August 18, 2023.** Submit entire application at one time, by mail, email or in person to Lois Slick, Director of Human Resources, LifeCare Medical Center at the address listed at the end of the application.

APPLICATION CRITERIA FOR ELIGIBILITY:

- You must currently be enrolled in a post secondary or graduate academic program in a specific health care field of study.
- You must have completed at least one year of study in a health care related program.
- You must be a high school graduate of a Roseau County school or currently living in Roseau County.
- You must complete a LifeCare Medical Student Scholarship Application Form.
- You must attach a copy of your answers, in essay format, to the Application Form.
- You must attach a letter of recommendation to the Application Form.
- You must attach your most recent transcript to the Application Form.
- You must attach proof of future enrollment to the Application Form (this can be in form of a letter from your advisor or a declaration of intent from the educational institution).
- One award per person per lifetime.

SELECTION AND AWARD PROCEDURE:

1. The scholarship selection is completed by a Scholarship Committee and based on the above criteria.
2. Our vision is to provide scholarships to local students who will possibly return to the area as healthcare professionals, however, current employment or intent is not required but may be considered.
3. Quality and neatness of application will be considered. Professional appearance, all above criteria, as well as spelling and grammar will also be considered in review of the application
4. Announcement of the scholarship selection shall be made in a letter from the selection committee to the successful applicant.
5. The award check will be issued to the recipient within 90 days of selection.

**LIFECARE MEDICAL STUDENT SCHOLARSHIP
APPLICATION FORM**

Applicant Name: _____ Date: _____

Your Address while at school: _____

Home Address (if different): _____

Email Address: _____

Cell Phone: _____ Home Phone: _____ Birth Date: _____

Name of Parent or Guardian (optional): _____

Current School of Enrollment: _____

Major Field of Study _____

Date Current Program Started: _____ Expected Graduation Date: _____

Please type the answers to these questions on a separate sheet of paper in essay format and attach to this application form.

1. What type of medical career have you chosen to pursue?
2. Why have you targeted healthcare as a career track?
3. Have you ever worked, volunteered or had a personal experience in a medical related field?
Explain how this has impacted your life and your decision to pursue a medical related career?
4. Other comments?

Please also attach a letter of recommendation from a professor or member of the community who is not a family member. This letter should point out personal attributes that make you a good candidate for this scholarship.

_____ If I am selected, I give LifeCare permission to publicize award information and photos for marketing purposes.

Signature of Applicant

Date

Questions regarding the scholarship or the application should be directed to:

Lois Slick
Director of Human Resources
LifeCare Medical Center
715 Delmore Drive, Roseau, MN 56751
218-463-4309, lslick@lifecaremc.com